Case 19-23942 Doc 22 Filed 10/07/19 Entered 10/07/19 16:53:01 Desc Main Document Page 1 of 29

Document Page 1 of 29		
d this filing:		
iddle Name Last Name		
iddie Name Last Name		
ERN DISTRICT OF ILLINOIS		
		☐ Check if this is a
		amended filing
		12/15
Other Real Estate You Own or Have an Interest In		
n any residence, building, land, or similar property?		
What is the property? Check all that apply		
Single-family home		ured claims or exemptions. Put secured claims on Schedule D:
		re Claims Secured by Property.
Condominant of cooperative		
Manufactured or mobile home	Current value of the	
- <u> </u>		portion you own? .00 \$1,300,000.00
☐ Timeshare		
☐ Other	(such as fee simpl	re of your ownership interest le, tenancy by the entireties, or
	• • •	own.
m	i ee simple	
Debtor 1 and Debtor 2 only		
At least one of the debtors and another	Check if this i	s community property
_	m, such as local	
property identification number:		
	at an asset only once. If an asset fits in more than o ible. If two married people are filing together, both a sheet to this form. On the top of any additional page. Other Real Estate You Own or Have an Interest In any residence, building, land, or similar property? What is the property? Check all that apply Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare Other Who has an interest in the property? Check one Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another	ddle Name

Case 19-23942 Doc 22 Filed 10/07/19 Entered 10/07/19 16:53:01 Desc Main Document Page 2 of 29 Debtor 1 Sam Buchbinder Case number (if known) 19-23942 If you own or have more than one, list here: 1.2 What is the property? Check all that apply 2301 Gulf of Mexico Drive #94N Single-family home Do not deduct secured claims or exemptions. Put Street address, if available, or other description the amount of any secured claims on Schedule D: Duplex or multi-unit building П Creditors Who Have Claims Secured by Property. Condominium or cooperative Manufactured or mobile home Current value of the Current value of the Longboat Key FL 34228-0000 Land entire property? portion you own? ZIP Code Investment property \$470,000.00 \$470,000.00 П Timeshare Describe the nature of your ownership interest ☐ Other (such as fee simple, tenancy by the entireties, or a life estate), if known. Who has an interest in the property? Check one Debtor 1 only Fee simple Sarasota Debtor 2 only County Debtor 1 and Debtor 2 only Check if this is community property At least one of the debtors and another Other information you wish to add about this item, such as local property identification number: If you own or have more than one, list here: 1.3 What is the property? Check all that apply 2301 Gulf of Mexico Drive Unit 93N Single-family home Do not deduct secured claims or exemptions. Put Street address, if available, or other description the amount of any secured claims on Schedule D: Duplex or multi-unit building Creditors Who Have Claims Secured by Property. Condominium or cooperative Manufactured or mobile home П Current value of the Current value of the Longboat Key FL 34228-0000 Land entire property? portion you own? City State ZIP Code investment property \$600,000.00 \$600,000.00 Timeshare Describe the nature of your ownership interest Other (such as fee simple, tenancy by the entireties, or Who has an interest in the property? Check one a life estate), if known. ☐ Debtor 1 only Fee simple Sarasota Debtor 2 only County Debtor 1 and Debtor 2 only Check if this is community property At least one of the debtors and another (see instructions) Other information you wish to add about this item, such as local property identification number: 2. Add the dollar value of the portion you own for all of your entries from Part 1, including any entries for \$2,370,000,00 pages you have attached for Part 1. Write that number here.....=>

Part 2: **Describe Your Vehicles**

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

3. Cars, vans, trucks, tractors, sport utility vehicles, motorcycles

M No

☐ Yes

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Official Form 106A/B

☐ Yes. Describe....

Case 19-23942 Doc 22 Filed 10/07/19 Entered 10/07/19 16:53:01 Desc Main Page 4 of 29 Document Debtor 1 Sam Buchbinder Case number (if known) 19-23942 14. Any other personal and household items you did not already list, including any health aids you did not list ☐ Yes. Give specific information..... 15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached \$2,000.00 for Part 3, Write that number here Part 4: Describe Your Financial Assets Do you own or have any legal or equitable interest in any of the following? Current value of the portion you own? Do not deduct secured claims or exemptions. 16. Cash Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition ☐ No Cash \$60.00 17. Deposits of money Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each. ☐ No Institution name: Yes..... 17.1. Checking Evergreen Bank \$1,000.00 17.2. Checking Ally Bank \$20.00 18. Bonds, mutual funds, or publicly traded stocks Examples: Bond funds, investment accounts with brokerage firms, money market accounts No. ☐ Yes..... Institution or issuer name: 19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture □ No Yes. Give specific information about them..... Name of entity: % of ownership: Samuel Buchbinder LLC 100 % \$0.00 20. Government and corporate bonds and other negotiable and non-negotiable instruments Negotiable instruments include personal checks, cashiers' checks, promissory notes, and money orders. Non-negotiable instruments are those you cannot transfer to someone by signing or delivering them. No ☐ Yes. Give specific information about them Issuer name: 21. Retirement or pension accounts Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans **■** No Yes. List each account separately. Type of account: Institution name:

Official Form 106A/B

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C	ebtor 1	Sam Bu	chbinder			Case number (if know	n)	19-23942
22	Your s	share of all u	and prepayment nused deposits yn nents with landlo	ou have made so that vo	u may continue se tilities (electric, ga	rvice or use from a company s, water), telecommunications comp	oani	es, or others
				41	nstitution name or	individual:		
23		ies (A contra	act for a periodic	payment of money to you	, either for life or f	or a number of years)		·
	■ No □ Yes		issuer name a	and description.				
24	. Interest 26 U.S.	t s in an edu C. §§ 530(b)	cation IRA, in a (1), 529A(b), and	n account in a qualified 1 529(b)(1).	ABLE program, o	or under a qualified state tuition p	rog	ram.
	Yes		Institution nan	ne and description. Separa	ately file the record	ds of any interests.11 U.S.C. § 521(c):	
25.	Trusts,	equitable o	r future interes	ts in property (other tha	n anything listed	in line 1), and rights or powers e	xer	cisable for your benefit
		Give specific	c information abo	out them				
	Patents Examp	s, copyrights les: internet	s, trademarks, t domain names,	rade secrets, and other websites, proceeds from r	intellectual prope oyalties and licens	erty sing agreements		
	☐ Yes.	Give specific	information abo	out them				
	License Exampl	es, franchise les: Building	es, and other ge permits, exclusiv	neral intangibles ve licenses, cooperative a	ssociation holding	s, liquor licenses, professional licen	ses	
	☐ Yes.	Give specific	information abo	ut them				
Mo	ney or p	roperty owe	ed to you?					Current value of the portion you own? Do not deduct secured claims or exemptions.
	Tax refu	nds owed t	o you					
		live specific i	information abοι	t them, including whether	you already filed t	the returns and the tax years		
ı	No No	es: Past due	or lump sum alir	nony, spousal support, ch	ild support, mainte	enance, divorce settlement, property	/ se	ttlement
	Example No	s: Unpaid w	unpaid loans you	nsurance payments, disab nade to someone else	ility benefits, sick	pay, vacation pay, workers' compe	nsat	tion, Social Security
31. 1	nterests	in insuranc	e policíes					
	<i>Example</i> █ No	s: Health, dis	sability, or life ins	surance; health savings a	ccount (HSA); cred	dit, homeowner's, or renter's insurar	ice	
] Yes. Na	ame the insu	rance company Compan	of each policy and list its v y name:	ralue.	Beneficiary;		Surrender or refund value:
	lf you are	est in prope the benefici has died.	erty that is due g ary of a living tru	you from someone who ist, expect proceeds from	has died a life insurance po	olicy, or are currently entitled to rece	evik	property because
		ve specific ir	nformation					

Official Form 106A/B

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D	ebtor 1	Sam Buchbinder	Case number (if known)	19-23942
33	Claims Exam	against third parties, whether or not you have filed a ples: Accidents, employment disputes, insurance claims,	a lawsuit or made a demand for payment or rights to sue	
		Describe each claim		
34	Other	contingent and unliquidated claims of every nature, in	ncluding counterclaims of the debtor and rights t	o set off claims
		Describe each claim		
35.	Any fin	ancial assets you did not already list		
	M No			
	LJ Yes.	Give specific information.,		
36	. Add t for Pa	ne dollar value of all of your entries from Part 4, inclurt 4. Write that number here	ding any entries for pages you have attached	\$1,080.00
Pa	it 5: Des	cribe Any Business-Related Property You Own or Have an I	nterest In. List any real estate in Part 1.	
37.	Do you o	wn or have any legal or equitable interest in any business-re	elated property?	
	No. Go	to Part 6.		
	J Yes. G	to line 38.		
	if you Do you No. C	cribe Any Farm- and Commercial Fishing-Related Property You own or have an interest in farmland, list it in Part 1. cown or have any legal or equitable interest in any fartio to Part 7. Go to line 47.		
Par	:7:	Describe All Property You Own or Have an Interest in That Y	You Did Not List Above	
	Example -	nave other property of any kind you did not already li es: Season tickets, country club membership	st?	
	■ No □ Yes. G	ive specific information		
			p	
54.	Add th	e dollar value of all of your entries from Part 7. Write	that number here	\$0.00
Part	8: 1	ist the Totals of Each Part of this Form	L-	
55. 56.		Total real estate, line 2		\$2,370,000.00
57.		Total vernicles, line 5 Total personal and household items, line 15	\$0.00 \$2,000.00	
58.		Total financial assets, line 36	\$1,080.00	
59.		Total business-related property, line 45	\$0.00	
60.	Part 6:	Fotal farm- and fishing-related property, line 52	\$0.00	
61.		Total other property not listed, line 54	+\$0.00	
62.	Total pe	ersonal property. Add lines 56 through 61	\$3,080.00 Copy personal property tot	al \$3,080.00
63.	Total of	all property on Schedule A/B. Add line 55 + line 62		\$2,373,080.00

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Fill in this infor	nation to identify your c	ase:			
Debtor 1	Sam Buchbinder	NI-LIL XI			
Debtor 2	rust Name	Middle Name		Last Name	
(Spouse if, filing)	First Name	Middle Name		Last Name	
United States Ba	nkruptcy Court for the:	NORTHERN DISTRICT OF	ILLI	NOIS	M.
Case number (if known)	19-23942				☐ Check if this is an amended filing
Official Fo	rm 106C				
Schedule	e C: The Pro	perty You Cla	in	n as Exempt	4/1
the property you lis	sted on <i>Schedule A/B: Pro</i> d attach to this page as ma	perty (Official Form 106A/B)	as ı	our source, list the property that you	or supplying correct information. Usin u claim as exempt. If more space is y additional pages, write your name a
specific dollar am any applicable sta unds—may be un exemption to a pa	ount as exempt. Alterna atutory limit. Some exem ilimited in dollar amoun	itively, you may claim the f options—such as those for t. However, if you claim an	full fa hea exe	air market value of the property be Ith aids, rights to receive certain a mption of 100% of fair market val	One way of doing so is to state a eing exempted up to the amount of benefits, and tax-exempt retiremen ue under a law that limits the it, your exemption would be limited
	the Property You Claim	as Exempt			
1. Which set of	exemptions are you clain	ming? Check one only, ever	n if y	our spouse is filing with you.	
		onbankruptcy exemptions. 1			
_	iming federal exemptions.			· · · · · · · · · · · · · · · · · · ·	
2. For any prope	erty you list on Schedule	A/B that you claim as exe	mpt,	fill in the information below.	
Brief descriptio	n of the property and line o nat lists this property			ount of the exemption you claim	Specific laws that allow exemption
ar Profit of the		Copy the value from Schedule A/B	Ċh	ack only one box for each exemption.	
Cash		\$60.00	100	\$60.00	735 ILCS 5/12-1001(b)
Line from Sche	aule A/B: 1 6. 1			100% of fair market value, up to any applicable statutory limit	
Checking: E	vergreen Bank	\$1,000.00		\$1,000.00	735 ILCS 5/12-1001(b)
Ente from Gene	dule A/B. 11.1			100% of fair market value, up to any applicable statutory limit	
Checking: Al		\$20.00		\$20.00	735 ILCS 5/12-1001(b)
Ellie HORE GENE	uulo AV (). 11 s£			100% of fair market value, up to any applicable statutory limit	
(Subject to adju	stment on 4/01/22 and ev		es fil	ed on or after the date of adjustmen 215 days before you filed this case?	•

No

Yes

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		0 01 23		
Fill in this information to identify	your case:			
Debtor 1 Sam Buchbir				
Debtor 2	Middle Name Last Name			
(Spouse if, filing) First Name	Middle Name Łast Name		_	
United States Bankruptcy Court for t	he: NORTHERN DISTRICT OF ILLINOIS		_	
Case number 19-23942				
(if known)			_	k if this is an
			amen	ded filing
Official Form 106D				
Schedule D: Credito	rs Who Have Claims Secur	ed by Propert	tv	12/15
Be as complete and accurate as possible	le. If two married people are filing together, both are it out, number the entries, and attach it to this form.	equally responsible for s	upplying correct inform	ation. If more space
1. Do any creditors have claims secured	by your property?			
\square No. Check this box and subm	it this form to the court with your other schedules.	You have nothing else	to report on this form.	
Yes. Fill in all of the information	on below.			
Part 1: List All Secured Claims				
for each claim. If more than one creditor h	as more than one secured claim, list the creditor separate has a particular claim, list the other creditors in Part 2. As etical order according to the creditor's name.	Amount of claim Do not deduct the	Column B Value of collateral that supports this	Column C Unsecured portion
2.1 Bank of America	Describe the property that secures the claim:	value of collateral. \$283,192,46	claim \$1,300,000.00	If any \$283,192.46
Creditor's Name	1737 Sunnyside Avenue Highland Park, IL 60035 Lake County			-
PO Box 31785 Tampa, FL 33631-3785	As of the date you file, the claim is: Check all that apply. Contingent			
Number, Street, City, State & Zip Code	Unliquidated			
	☐ Disputed			
Who owes the debt? Check one.	Nature of lien. Check all that apply.			
☐ Debtor 1 only ☐ Debtor 2 only	An agreement you made (such as mortgage or s car loan)	ecured		
Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic's lien)			
At least one of the debtors and another				
☐ Check if this claim relates to a	Other (including a right to offset)			
community debt				
Date debt was incurred	Last 4 digits of account number 8739			
2.2 Bank of America	Describe the property that secures the claim:	\$164,000.00	\$600,000.00	\$440 FC4 22
Creditor's Name	2301 Gulf of Mexico Drive Unit 93N	\$104,000.00	\$600,000.00	\$110,564.33
	Longboat Key, FL 34228 Sarasota County			
PO Box 31785	As of the date you file, the claim is: Check all that			
Tampa, FL 33631-3785	apply. □ Contingent			
Number, Street, City, State & Zip Code	☐ Unliquidated			
	☐ Disputed			
Who owes the debt? Check one.	Nature of lien. Check all that apply.			
Debtor 1 only	 An agreement you made (such as mortgage or se car loan) 	cured		
Debtor 2 only Debtor 1 and Debtor 2 only	Statutory lien (such as tax lien, mechanic's lien)			
At least one of the debtors and another	☐ Judgment lien from a lawsuit			
☐ Check if this claim relates to a	Other (including a right to offset)			
community debt	3 - 13/110 - 110009			
Date debt was incurred	Last 4 digits of account number 7475			

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Debtor 1 Sam Buchbinder		Case number (if known)	19-23942	
First Name Middle	Name Last Name	, ,		
Ocwen Loan Servicing,	Describe the property that secures the claim:	\$433,377.21	\$470,000.00	\$0.00
Creditor's Name	2301 Gulf of Mexico Drive #94N			T + 1 - 1
1661 Worthington Road Suite 100	Longboat Key, FL 34228 Sarasota County			· ·
West Palm Beach, FL 33409	As of the date you file, the claim is: Check all that apply. Contingent			
Number, Street, City, State & Zip Code	☐ Unliquidated ☐ Disputed			
Who owes the debt? Check one.	Nature of lien. Check all that apply.			
Debtor 1 only Debtor 2 only	☐ An agreement you made (such as mortgage or s car loan)	secured		
Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic's lien)			
At least one of the debtors and another	☐ Judgment lien from a lawsuit			
☐ Check if this claim relates to a community debt	Other (including a right to offset)			
Date debt was incurred 3/06/17 Ocwen Loan Servicing,	Last 4 digits of account number 4938			
LLC	Describe the property that secures the claim:	\$546,564.33	\$600,000.00	\$0.00
Creditor's Name 1661 Worthington Road Suite 100 West Palm Beach, FL 33409	2301 Gulf of Mexico Drive Unit 93N Longboat Key, FL 34228 Sarasota County As of the date you file, the claim is: Check all that apply. □ Contingent			
Number, Street, City, State & Zip Code	☐ Unliquidated☐ Disputed			
Who owes the debt? Check one.	Nature of lien. Check all that apply.			
☐ Debtor 1 only ☐ Debtor 2 only	☐ An agreement you made (such as mortgage or se car loan)	cured	v	
Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic's lien)			
At least one of the debtors and another	☐ Judgment lien from a lawsuit			
☐ Check if this claim relates to a community debt	Other (including a right to offset)			
Opened 12/15/05 Last Active Date debt was incurred 3/06/17	Last 4 digits of account number 5117			

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Debtor 1 Sam Buchbinder		Case number (if known)	19-23942	
First Name M	liddle Name Last Name			· · · · · · · · · · · · · · · · · · ·
2.5 Servicing Corporation	Describe the property that secures the claim	\$106,000.00	\$470,000.00	\$69,377.21
Creditor's Name	2301 Gulf of Mexico Drive #94N			
	Longboat Key, FL 34228 Sarasota County			
323 5th Street	As of the date you file, the claim is: Check all the	mat		
Eureka, CA 95501	apply. Contingent			
Number, Street, City, State & Zip Cod-				
, , , , , , , , , , , , , , , , , , , ,	Disputed			
Who owes the debt? Check one.	Nature of lien. Check all that apply.			
Debtor 1 only	An agreement you made (such as mortgage	or secured		
Debtor 2 only	car loan)			
Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic's lie ☐ Judgment lien from a lawsuit	en)		
At least one of the debtors and anot Check if this claim relates to a				
community debt	Other (including a right to offset)			
Date debt was incurred	Last 4 digits of account number 58	83		
2.6 Specialized Loan				
Servicing/SLS Creditor's Name	Describe the property that secures the claim:	\$1,407,051.36	\$1,300,000.00	\$107,051.36
	1737 Sunnyside Avenue Highland			
Attn: Bankruptcy Dept 8742 Lucent Blvd #300	Park, IL 60035 Lake County			
Highlands Ranch, CO	As of the date you file, the claim is: Check all that apply.	t		
80129	☐ Contingent			
Number, Street, City, State & Zip Code	Unliquidated			
Who owes the debt? Check one.	☐ Disputed			
Debtor 1 only	Nature of lien. Check all that apply.			
Debtor 2 only	☐ An agreement you made (such as mortgage or car loan)	r secured		
☐ Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic's lien	. ·		
At least one of the debtors and anoth	pung.	''		
Check if this claim relates to a community debt	☐ Other (including a right to offset)			
Opened				
1/20/06				
Last Activ Date debt was incurred 5/19/17	e Last 4 digits of account number 467	7		
2/13/17	Last 4 digits of account number 407			
Add the dollar value of your entries in	n Column A on this page. Write that number here:	\$2,940,185.	36	
If this is the last page of your form, a Write that number here:	dd the dollar value totals from all pages.	\$2,940,185.		
	Saw a Dobé Thué Von Alon C. 1.1.2.1	+-,010,1001		
	for a Debt That You Already Listed			
aying to conect from you for a debt you	o be notified about your bankruptcy for a debt that y u owe to someone else, list the creditor in Part 1, an hat you listed in Part 1, list the additional creditors h t this page.	d then list the collection seen.	ar hara Cimilante if	
Name, Number, Street, City, State Brock & Scott PLLC	& Zip Code On w	/hich line in Part 1 did you enter	the creditor? 2.3	
1315 Westbrook Plaza Dr Winston Salem, NC 27103	Lagi	4 digits of account number		

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Debto	r ¹ Sam Buchbi	nder		Case number (if known)	19-23942
	First Name	Middle Name	Last Name	•	
	Brock & Scott P	Plaza Dr. Suite 100		On which line in Part 1 did you ente	er the creditor?
				On which line in Part 1 did you ente	r the creditor? <u>2.6</u>

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		Boodinent	i age I	2 01 23	
Fill in this infor	mation to identify your c	ase:			
Debtor 1	Sam Buchbinder				
	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name		
United States Ba	inkruptcy Court for the:	NORTHERN DISTRICT OF IL	LINOIS		
Case number	19-23942				
(if known)					☐ Check if this is an
					amended filing
Official Forn	n 106E/F				
		o Have Unsecured	Claims		12/15
iny executory cont Schedule G: Execut Schedule D: Credito	racts or unexpired leases th tory Contracts and Unexpire ors Who Have Claims Secur- tinuation Page to this page.	at could result in a claim. Also ed Leases (Official Form 106G). I ed by Property. If more space is	list executory Do not include needed, copy	Part 2 for creditors with NONPRIO contracts on Schedule A/B: Proper any creditors with partially secure the Part you need, fill it out, numbed not file that Part. On the top of	ty (Official Form 106A/B) and on d claims that are listed in ar the entries in the boyes on the
Part 1: List Al	of Your PRIORITY Unse	cured Claims			
1. Do any credito	rs have priority unsecured o	taims against you?			
Mo. Go to Pa	art 2.				
☐ Yes.					
Pari 2: List Al	of Your NONPRIORITY	Unsecured Claims			
	rs have nonpriority unsecur				
_	· -	Submit this form to the court with	ath av a sh	_ at f	
	e nothing to report in this part.	Submit this form to the court with	your other sch	edules,	
Yes.					
unsecured claim	i, list the creditor separately to	r each claim. For each claim listed	. identify what t	b holds each claim. If a creditor has new period of claim it is. Do not list claims always are three nonpriority unsecured claims file.	eady included in Part 1. If more
					Total claim
Ally/TD E	Bank NA	Last 4 digits of acco	ount number	2255	\$11,623.00
Nonpriority (Creditor's Name			0 100140 1 4 4 4	***************************************
	ard Servicing ıs, GA 31908	When was the debt	incurred?	Opened 06/16 Last Active 8/02/19)
	eet City State Zip Code	As of the date you f	ile, the claim i	s: Check all that apply	
	ed the debt? Check one.				
Debtor 1	•	☐ Contingent			
Debtor 2	•	Unliquidated			
	and Debtor 2 only	☐ Disputed			
	one of the debtors and anothe		TY unsecured	claim:	
☐ Check if debt	this claim is for a commun				
	subject to offset?		j out of a separ is	ation agreement or divorce that you d	id not
No No				plans, and other similar debts	
☐ Yes		Other Specify C			
		- Other, Specify	vaiu		

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Deb	tor 1 Sam Buchbinder		Case number (if known) 19-23942	
4.2	Amex Nonpriority Creditor's Name	Last 4 digits of account number	1753	\$13,901.00
	Po Box 297871 Fort Lauderdale, FL 33329	When was the debt incurred?	Opened 08/12 Last Active 8/26/17	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	•
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	No.	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify Credit Card		
4.3	Amex Nonpriority Creditor's Name	Last 4 digits of account number	3733	\$2,367.00
	Po Box 297871 Fort Lauderdale, FL 33329	When was the debt incurred?	Opened 01/90 Last Active 8/26/17	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	lacksquare At least one of the debtors and another	Type of NONPRIORITY unsecured	claim:	
	☐ Check if this claim is for a community	Student loans		
	debt is the claim subject to offset?	report as priority claims	ation agreement or divorce that you did not	
	No No	Debts to pension or profit-sharing	plans, and other similar debts	
	Yes	Other. Specify Credit Card		
4.4	Amex	Last 4 digits of account number	2173	\$1,414.00
	Nonpriority Creditor's Name Correspondence/Bankruptcy Po Box 981540 El Paso, TX 79998	When was the debt incurred?	Opened 10/13 Last Active 8/26/17	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is	: Check all that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	At least one of the debtors and another	Type of NONPRIORITY unsecured	claim:	
	☐ Check if this claim is for a community	Student loans		
	debt Is the claim subject to offset?	report as priority claims	tion agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	plans, and other similar debts	
	☐Yes	Other. Specify Credit Card		

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tor 1 Sam Buchbinder		Case number (if known) 19-23942	
Amex	Last 4 digits of account number	1783	\$0.00
Correspondence/Bankruptcy Po Box 981540	When was the debt incurred?	Opened 09/74 Last Active 09/17	
Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply	4
	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
\square At least one of the debtors and another		d claim:	
☐ Check if this claim is for a community			
debt Is the claim subject to offset?	Obfigations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
No No	Debts to pension or profit-sharing	ng plans, and other similar debts	
☐ Yes	Other. Specify Credit Card	1	
Amex Nonpriority Creditor's Name	Last 4 digits of account number	9633	\$0.00
Correspondence/Bankruptcy Po Box 981540 FI Paso, TX 79998	When was the debt incurred?	Opened 05/74 Last Active 09/14	
Number Street City State Zip Code	As of the date you file, the claim i	s: Check all that apply	
Who incurred the debt? Check one.		,	
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
\square At least one of the debtors and another		claim:	
☐ Check if this claim is for a community			
debt Is the claim subject to offset?	Obligations arising out of a separ report as priority claims	ation agreement or divorce that you did not	
No No	Debts to pension or profit-sharing	plans, and other similar debts	
☐ Yes	Other. Specify Credit Card		
Amex	Last 4 digits of account number	2183	\$0.00
Correspondence/Bankruptcy Po Box 981540	When was the debt incurred?	Opened 10/74 Last Active 6/20/08	
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is	: Check all that apply	
Debtor 1 only	☐ Contingent		
☐ Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	· ·	claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	Obligations arising out of a separa report as priority claims	tion agreement or divorce that you did not	
Мо	Debts to pension or profit-sharing	plans, and other similar debts	
Yes	Other. Specify Credit Card		
	Amex Nonpriority Creditor's Name Correspondence/Bankruptcy Po Box 981540 El Paso, TX 79998 Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt is the claim subject to offset? No Yes Amex Nonpriority Creditor's Name Correspondence/Bankruptcy Po Box 981540 El Paso, TX 79998 Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt is the claim subject to offset? No Yes Amex Nonpriority Creditor's Name Correspondence/Bankruptcy Po Box 981540 El Paso, TX 79998 Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 2 only Debtor 3 only Debtor 4 only Debtor 5 only Debtor 1 only Debtor 1 only Debtor 1 only Debtor 1 only Check if this claim is for a community debt is the claim subject to offset? Check if this claim is for a community debt least one of the debtors and another Check if this claim is for a community debt ls the claim subject to offset?	Amex Nonpriority Creditor's Name Correspondence/Bankruptcy Po Box 981540 El Paso, TX 79998 Number Street City State Zip Code Who incurred the debtors and another Correspondence/Bankruptcy Debtor 1 and Debtor 2 only Debtor 1 and Debtor 2 only Debtor 2 only Debtor 3 only Debtor 3 only Debtor 4 only Debtor 5 only Debtor 5 only Debtor 6 only Debtor 6 only Debtor 7 only Debtor 8 only Debtor 9 only Debtor 9 only Debtor 1 only Debtor 9 only Debtor 9 only Debtor 1 only Debtor 2 only Debtor 1 only Debtor 3 only Debtor 1 only Debtor 4 only Debtor 5 only Debtor 1 only Debtor 6 only Debtor 1 only Debtor 2 only Debtor 1 only Debtor 3 only Debtor 1 only Debtor 1 only Debtor 2 only Debtor 3 only Debtor 1 only Debtor 3 only Debtor 4 only Debtor 5 only Debtor 5 only Debtor 6 only Debtor 6 only Debtor 7 only Debtor 8 only Debtor 9 only Debtor 9 only Debtor 1 only Debtor 1 only Debtor 1 only Debtor 1 only Debtor 2 only Debtor 3 only Debtor 5 only Debtor 6 only Debtor 6 only Debtor 7 only Debtor 9 only Debtor 9 only Debtor 9 only Debtor 1 only Debtor 9 only Debtor 1 only Debtor 2 only Debtor 1 onl	Amex Last 4 digits of account number 1783

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Debtor	1 Sam Buchbinder		Case number (if known)	19-23942	
4.8	Bank of America	Last 4 digits of account number	0589		\$21,602.00
	Nonpriority Creditor's Name 4909 Savarese Circle FI1-908-01-50 Tampa, FL 33634	When was the debt incurred?	Opened 10/15 Last 11/20/17	t Active	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply		
	Debtor 1 only	☐ Contingent			
	☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only	☐ Unliquidated☐ Disputed			
	At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:		
	Check if this claim is for a community debt	☐ Student loans			
	Is the claim subject to offset?	Obligations arising out of a sepa report as priority claims	iration agreement or divorce	that you did not	
	No No	Debts to pension or profit-sharing	g plans, and other similar de	bts	
	Yes	Other. Specify Credit Card			
	Barclays Bank Delaware Nonpriority Creditor's Name	Last 4 digits of account number	1947		\$0.00
	Attn: Correspondence Po Box 8801 Wilmington, DE 19899	When was the debt incurred?	Opened 5/27/11 La 3/09/12	st Active	
-	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is	s: Check all that apply		
	Debtor 1 only	☐ Contingent			
	Debtor 2 only	☐ Unliquidated			
	Debtor 1 and Debtor 2 only	☐ Disputed			
	At least one of the debtors and another	Type of NONPRIORITY unsecured	claim:		
	☐ Check if this claim is for a community debt	☐ Student loans			
i	Is the claim subject to offset?	☐ Obligations arising out of a separ report as priority claims	-	•	
	No	Debts to pension or profit-sharing	plans, and other similar deb	ts	
	Yes	Other. Specify Credit Card			
- -	Capital One	Last 4 digits of account number	9099		\$35,678.00
F	Nonpriority Creditor's Name Attn: Bankruptcy Po Box 30285	When was the debt incurred?	Opened 02/16 Last / 12/21/17	Active	
N	Salt Lake City, UT 84130 Sumber Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is	: Check all that apply		
	Debtor 1 only	☐ Contingent			
[Debtor 2 only	☐ Unliquidated			
	Debtor 1 and Debtor 2 only	☐ Disputed			
	At least one of the debtors and another	Type of NONPRIORITY unsecured of	cłaim;		
	Check if this claim is for a community	☐ Student loans			
	ebt the claim subject to offset?	Obligations arising out of a separa report as priority claims			
	No	Debts to pension or profit-sharing	plans, and other similar debts	s	
Ε	Yes	Other. Specify Charge Acco	unt		

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Debto	1 Sam Buchbinder		Case number (if known) 19-23942	<u> </u>
4.1	Capital One Nonpriority Creditor's Name	Last 4 digits of account number	2081	\$0.00
	Po Box 30281 Salt Lake City, UT 84130	When was the debt incurred?	Opened 10/20/04 Last Active 1/22/18	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	-
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community debt	☐ Student loans ☐ Obligations arising out of a sepa	aration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims		
	No No	Debts to pension or profit-sharing	ig plans, and other similar debts	
	☐ Yes	Other. Specify Credit Card		
4.1 2	Chase Card Services Nonpriority Creditor's Name	Last 4 digits of account number	1576	\$0.00
	Attn: Bankruptcy Po Box 15298	When was the debt incurred?	Opened 01/11 Last Active 04/14	_
-	Wilmington, DE 19850 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	claim:	
	Check if this claim is for a community	Student loans		
	debt Is the claim subject to offset? —	report as priority claims	ration agreement or divorce that you did not	
	No No	Debts to pension or profit-sharing	plans, and other similar debts	
	Yes	Other. Specify Credit Card		-
' !	Chase Card Services Nonpriority Creditor's Name	Last 4 digits of account number	5858	\$0.00
, 	Attn: Bankruptcy Po Box 15298 Wilmington, DE 19850	When was the debt incurred?	Opened 12/93 Last Active 11/30/15	-
Ī	Number Street City Stale Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is	: Check all that apply	
	Debtor 1 only	☐ Contingent		
ļ	Debtor 2 only	☐ Unliquidated		
I	Debtor 1 and Debtor 2 only	☐ Disputed		
I	At least one of the debtors and another	Type of NONPRIORITY unsecured	claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	lebt		ation agreement or divorce that you did not	
_	s the claim subject to offset?	report as priority claims		
	■ No	Debts to pension or profit-sharing	pians, and other similar debts	
L	☐Yes	Other, Specify Credit Card		

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Debt	tor 1 Sam Buchbinder		Case number (if known) 19-23942	
4.1	Chase Card Services	Last 4 digits of account number	8419	\$0.00
	Nonpriority Creditor's Name Attn: Bankruptcy Po Box 15298 Wilmington, DE 19850	When was the debt incurred?	Opened 12/96 Last Active 9/24/15	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	is: Check all that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	l claim;	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	No No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify Credit Card		
4.1 5	Cheryll Less	Last 4 digits of account number		\$70,000.00
	Nonpriority Creditor's Name 21109 W. Cypress Court Plainfield, IL 60544	When was the debt incurred?		
	Number Street City State Zip Code	As of the date you file, the claim is	: Check all that apply	
	Who incurred the debt? Check one.		,,,	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	report as priority claims	ation agreement or divorce that you did not	
	No No	Debts to pension or profit-sharing	plans, and other similar debts	
	Yes	Other. Specify Personal Lo	an	
.1	Citibank	Last 4 digits of account number	1290	\$0.00
	Nonpriority Creditor's Name Attn: Recovery/Centralized Bankruptcy		Opened 10/18/00 Last Active 10/05/15	
	Po Box 790034 St Louis, MO 63179	Thick was the debt meaned;	10/03/13	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is:	Check all that apply	
	Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured of	laim:	
	☐ Check if this claim is for a community	Student loans		
	debt Is the claim subject to offset?	report as priority claims	tion agreement or divorce that you did not	
	Mo No	\square Debts to pension or profit-sharing p	olans, and other similar debts	
	Yes	Other. Specify Credit Card		

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Debt	or 1 Sam Buchbinder		Case number (if known) 19-23942	
4.1	Citibank	Last 4 digits of account number	6728	\$0.00
	Nonpriority Creditor's Name Citicorp/Attn: Centralized Bankruptcy Po Box 6241 Sioux Falls, SD 57117	When was the debt incurred?	Opened 11/01/93 Last Active 9/25/15	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured	i claim:	
	☐ Check if this claim is for a community	Student loans		
	debt Is the claim subject to offset?	report as priority claims	ration agreement or divorce that you did not	
	No No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify Credit Card		
4.1 8	Citibankna Nonpriority Creditor's Name	Last 4 digits of account number	5531	\$0.00
	Citibank Corp/Centralized Bankruptcy Po Box 790034	When was the debt incurred?	Opened 04/15 Last Active 10/05/15	
	St Louis, MO 63179 Number Street City State Zip Code	As of the date you file, the claim is	:: Check all that apply	
	Who incurred the debt? Check one.			
	Debtor 1 only	Contingent		
	Debtor 2 only	Unliquidated		
	Debtor 1 and Debtor 2 only	Disputed		
	At least one of the debtors and another	Type of NONPRIORITY unsecured ☐ Student loans	claim:	
	☐ Check if this claim is for a community debt Is the claim subject to offset?		ation agreement or divorce that you did not	
	No.	Debts to pension or profit-sharing	plans, and other similar debts	
	Yes	Other. Specify Unsecured	plants, and other similar debts	
.1				
	Credit Protection Association Nonpriority Creditor's Name	Last 4 digits of account number	3635	\$69.00
	Attn: Bankruptcy Po Box 802068 Dallas, TX 75318	When was the debt incurred?	Opened 02/19	
	Number Street City State Zip Code	As of the date you file, the claim is:	Check all that apply	
	Who incurred the debt? Check one.			
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured o	laim:	
	Check if this claim is for a community	Student loans		
	debt Is the claim subject to offset?	report as priority claims	ion agreement or divorce that you did not	
	No No	Debts to pension or profit-sharing p		
	Yes	Collection At Communicati	torney Frontier ons	

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Debto	or 1 Sam Buchbinder		Case number (if known) 19-23942	
4.2 0	Loan Care Servicing	Last 4 digits of account number	6620	\$0.00
	Nonpriority Creditor's Name Attn: Consumer Solutions Dept Po Box 8068 Virginia Beach, VA 23450	When was the debt incurred?	Opened 1/20/06 Last Active 10/25/12	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unfiquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not	
	M No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify Credit Line	Secured	
4.2 1	LVNV Funding/Resurgent Capital	Last 4 digits of account number	2081	\$20,301.00
	Nonpriority Creditor's Name Attn: Bankruptcy Po Box 10497	When was the debt incurred?	Opened 12/18	
	Greenville, SC 29603			
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is	: Check all that apply	
	Debtor 1 only	П		
	_	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed Type of NONPRIORITY unsecured	atalian	
	At least one of the debtors and another	Student loans	ciaim:	
	☐ Check if this claim is for a community debt			
	is the claim subject to offset?	report as priority claims	ation agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	plans, and other similar debts	
	☐ Yes		ompany Account Capital One	
.2	OCWEN Loan Servicing		6240	A 2.00
	Nonpriority Creditor's Name	Last 4 digits of account number	6249	\$0.00
	Attn: Bankruptcy 1661 Worthington Rd St. 100		Opened 1/20/06 Last Active 4/26/11	
-	West Palm Beach, FL 33409 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is:	Check all that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	At least one of the debtors and another	Type of NONPRIORITY unsecured of	elaim:	
	☐ At least one of the debtors and another ☐ Check if this claim is for a community	☐ Student loans		
	Li Check if this claim is for a community debt Is the claim subject to offset?		tion agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	plans, and other similar debts	
	☐ Yes	Other Specify Credit Line S		
		- Other, Specify Oroth Eine S		

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Debte	or 1 Sam Buchbinder		Case number (if known) 19-23942	
4.2	OneWest Bank Mortgage Servicing	Last 4 digits of account number	7663	\$0.00
	Nonpriority Creditor's Name Attn: Bankruptcy, OneWest Bank Po Box 7056 Pasadena, CA 91109	When was the debt incurred?	Opened 12/15/05 Last Active 10/10/13	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	Debtor 1 only	Пол		
	Debtor 2 only	☐ Contingent ☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	ed claim:	
	☐ Check if this claim is for a community	☐ Student loans	a olami	
	debt Is the claim subject to offset?		aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
	Yes	Other, Specify Real Estate		
4.2	OneWest Bank Mortgage Servicing	Last 4 digits of account number	8083	\$0,00
<u></u>	Nonpriority Creditor's Name	The standard of the standard framework		Ψ0.00
	Attn: Bankruptcy, OneWest Bank Po Box 7056 Pasadena, CA 91109	When was the debt incurred?	Opened 12/15/05 Last Active 10/10/13	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	report as priority claims	ation agreement or divorce that you did not	
	No	Debts to pension or profit-sharing	plans, and other similar debts	
	Yes	Other. Specify Real Estate	Mortgage	
.2	Pnc Bank	Last 4 digits of account number	0474	\$37,021.00
	Nonpriority Creditor's Name Atn: Bankruptcy Department Po Box 94982: Ms: Br-Yb58-01-5 Cleveland, OH 44101	When was the debt incurred?	Opened 10/16 Last Active 6/14/18	
_	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is	: Check all that apply	
	Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unfiguidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	report as priority claims	tion agreement or divorce that you did not	
	Mo No	Debts to pension or profit-sharing	plans, and other similar debts	
-	□Yes	Other. Specify Automobile		

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						19-23942	
4.2	Us Bank		Last 4 digits of account number	- 37	760		\$0.00
	Nonpriority (Creditor's Name					\$U.UU
	Attn: Bar			O	pened 03/16 Last	Active	
	Po Box 5		When was the debt incurred?	_2/	20/18		
		ti, OH 45201 pet City State Zip Code	As of the date you file, the claim	ie C	hook all that annu.		-
		ed the debt? Check one.	no of the date you me, the class	115. CI	neck an mar apply		
	Debtor 1		П с				
	Debtor 2		☐ Contingent				
_		•	Unliquidated				
		and Debtor 2 only	☐ Disputed				
		ne of the debtors and another	Type of NONPRIORITY unsecure	ed clai	im:		
		this claim is for a community	☐ Student loans				
	debt is the claim	subject to offset?	Obligations arising out of a sep	aratior	n agreement or divorce t	hat you did not	
_	No	adject to onset:	report as priority claims				
			Debts to pension or profit-shari		ns, and other similar deb	ts	
L	☐ Yes		Other, Specify Automobil	е			
4.2 7 V	Nilliam J.	Marshall	Last 4 digits of account number				\$40,000,00
17		reditor's Name	Last 4 digits of account number				\$10,000.00
		Oak Drive	When was the debt incurred?				
L	ongwood	d, FL 32779	-				
		et City State Zip Code	As of the date you file, the claim	is: Che	eck all that apply		
		the debt? Check one.	<u>_</u>				
	Debtor 1 o	*	☐ Contingent				
	Debtor 2 o	nly	☐ Unfiquidated				
	Debtor 1 a	nd Debtor 2 only	Disputed				
	At least on	e of the debtors and another	Type of NONPRIORITY unsecured	d clain	n:		
		his claim is for a community	☐ Student loans				
	ebt		Obligations arising out of a sepa	ration	agreement or divorce the	at you did not	
		ubject to offset?	report as priority claims				
	No		Debts to pension or profit-sharin	g plans	s, and other similar debts	3	
	Yes		Other. Specify Personal Lo	oan			
5. Use this p	page only if	rs to Be Notified About a Debt	out your bankruptcy, for a debt that w	ou alre	eady listed in Parts 1 o	r 2 For example, if	a collection agency
have mor notified for Part 4:	re than one for any debt	orn you for a debt you owe to som creditor for any of the debts that y s in Parts 1 or 2, do not fill out or : mounts for Each Type of Uns certain types of unsecured claim	eone else, list the original creditor in ou listed in Parts 1 or 2, list the addit submit this page.	Parts ional c	1 or 2, then list the coll creditors here. If you d	lection agency her o not have addition	e. Similarly, if you nal persons to be
	6-	Damaetia augus est abliqueti			Total Cla		
Total	6a.	Domestic support obligations		6a.	\$	0.00	
claims							
from Part 1	6b.	Taxes and certain other debts y	-	6b.	\$	0.00	
	6c.	Claims for death or personal inj		6c.	\$	0.00	
	6d.	Other. Add all other priority unsec	ured claims. Write that amount here.	6d.	\$	0.00	
	6e,	Total Priority. Add lines 6a throug	h 6d.	6e.	\$	0.00	
						,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
	6f.	Student loans		6f.	Total Clai \$		
Total					Ψ	0.00	
claims from Part 2	6~	Obligations suicing and of					
avm rait Z	6g.	Obligations arising out of a sepa you did not report as priority cla	n anon agreement or divorce that ims	6g.	\$	0.00	

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Debtor 1 S	am Bucl	nbinder	Case no	umber (if known)	19-23942	
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$	0.00	
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$	223,976.00	
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$	223,976.00	

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Fill ir	n this inforn	nation to identify you	r Case:		
Debte	or 1	Sam Buchbinder	r		
		First Name	Middle Name	Last Name	
Debto	or 2 se if, filing)	First Name	Middle Name	Łast Name	
Unite	ed States Bar	nkruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS	
i		9-23942			
(if know	wn)				☐ Check if this is an
					amended filing
Offic	cial For	m 106H			
Sch	redule	H: Your Cod	ebtors		12/15
people fill it o your n	e are filing to out, and num name and ca	ogether, both are equals of the entries in the se number (if known)	ally responsible for supp boxes on the left. Attach Answer every question.	ts you may have. Be as complete and acc lying correct information. If more space i the Additional Page to this page. On the lo not list either spouse as a codebtor.	s needed, copy the Additional Page
		re any codebtors: (ii)	you are ming a joint case, o	o not list either spouse as a codeptor.	
	l No				
86	Yes				
2 . Ar	Within the I rizona, Califo	l <mark>ast 8 years, have you</mark> ornia, Idaho, Louisiana,	lived in a community pro Nevada, New Mexico, Pue	perty state or territory? (Community properto Rico, Texas, Washington, and Wisconsi	erty states and territories include n.)
	No. Go to lir	202			
			use, or legal equivalent five	with you at the time?	
	res. Dia yo	ui spouse, ioiillei spou	se, or legal equivalent live	with you at the time?	
in Fo	line 2 again	ı as a codebtor only if Schedule E/F (Official	fthat person is a quaranto	pouse as a codebtor if your spouse is fil or or cosigner. Make sure you have listed le G (Official Form 106G). Use Schedule I	the creditor on Schedule D (Officia
		1: Your codebtor ber, Street, City, State and ZIF	² Code	Column 2: The c Check all schedu	reditor to whom you owe the debt ules that apply:
3.1	Rene Bi	uchbinder		Cabadula D	lima 24
		innyside Avenue		■ Schedule D, □ Schedule E/	
	Highlan	d Park, IL 60035		☐ Schedule G	, IRIC
				Bank of Ameri	ca
3.2		uchbinder		Schedule D,	line 2.3
		nnyside Avenue		☐ Schedule E/I	
	Highlan	d Park, IL 60035		☐ Schedule G	
				Ocwen Loan S	ervicing, LLC
_					
3.3		ıchbinder		Schedule D,	line 2.5
		nnyside Avenue d Park, IL 60035		☐ Schedule E/F	, line
	inginant	a r aik, iL 00033		☐ Schedule G _	
				Servicing Corp	oration

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Debtor	Sam Buchbinder	Case number (if known) 19-23942
	Additional Page to List More Codebtors	
	Column 1: Your codebtor	Column 2: The creditor to whom you owe the debt Check all schedules that apply:
3.4	Rene Buchbinder 1737 Sunnyside Avenue Highland Park, IL 60035	Schedule D, line 2.4 Schedule E/F, line Schedule G Ocwen Loan Servicing, LLC
3.5	Rene Buchninder 1737 Sunnyside Avenue Highland Park, IL 60035	Schedule D, line 2.6 Schedule E/F, line Schedule G Specialized Loan Servicing/SLS

	otor 1 Sam	Buchbinder								
	otor 2 use, if filing)		,			***************************************				
Unit	ed States Bankruptcy Cou	rt for the: NOR	THERN DISTR	ICT OF ILLINOIS						
Cas	e number 19-23942						Check if this	is.		
(If kno	own)						☐ An amen	ded filing		
							☐ A supple	ment show	ving postpetitic e following dat	on chapter e:
<u>Of</u>	<u>ficial Form 106</u>	<u> </u>					MM / DD	/ ۷۷۷۷		
Sc	hedule I: Your	r Income					1VIIVI 7 (50)	, , , , ,		12/1
	1: Describe Emplo Fill in your employment information.			Debtor 1			Nahioi	2 or non	filing coours	
	If you have more than one	e inh		Employed			Debtor	·····	-filing spouse	
i	attach a separate page wii information about addition employers.	th Emplo	yment status	☐ Not employed			_ '	employed		
	employers.	Occup	ation	Part Time Sale:	<u> </u>					
ı	Include part-time, seasona self-employed work.		yer's name	Continental Cre	edit					
:		Employ tudent Employ	yer's name yer's address	Continental Cro 1737 Sunnyside Highland Park,	e Aveni	је 5				
; ;	self-employed work. Occupation may include st	Employ tudent Employ		1737 Sunnyside Highland Park,	e Aveni IL 6003	је 5				
; ;	self-employed work. Occupation may include stor homemaker, if it applies	tudent Employs. How lo	yer's address	1737 Sunnyside Highland Park,	e Aveni IL 6003	ле :5				
l o o o o o o o o o o o o o o o o o o o	self-employed work. Occupation may include stor homemaker, if it applies	Employ tudent Employ How lo	ver's address ng employed t	1737 Sunnyside Highland Park, here? 10 year	e Avenu IL 6003	5	line, write \$0 in the	space. In	clude your no	n-filing
eart 2 stima souse	self-employed work. Occupation may include stor homemaker, if it applies Give Details Aboute monthly income as of	tudent Employs. How loout Monthly Inco	yer's address ng employed ti me le this form. If y	1737 Sunnyside Highland Park, here? 10 year	e Avenu IL 6003 rs	any			·	-
dart 2	Self-employed work. Occupation may include stor homemaker, if it applies Give Details About the monthly income as of a unless you are separated or your non-filing spouse hor your no	tudent Employs. How loout Monthly Inco	yer's address ng employed ti me le this form. If y	1737 Sunnyside Highland Park, here? 10 year	e Avenu IL 6003 rs	any		on on the li	·	-
art 2 stima ouse you core s	Self-employed work. Occupation may include stor homemaker, if it applies Give Details About the monthly income as of a unless you are separated or your non-filing spouse hor your no	Employ tudent Employ How lo out Monthly Inco f the date you fild. have more than or heet to this form.	yer's address ng employed to me le this form. If y ne employer, co	1737 Sunnyside Highland Park, here? 10 year you have nothing to re- mbine the information	e Avenu IL 6003 rs	any	oyers for that perso	on on the li	ines below. If	-
art 2 art 2 stima ouse you copre s	Give Details About a monthly income as or your non-filing spouse heads, attach a separate ships at monthly gross wages ist monthly gross wages	How loo tudent Employ How loo the date you fill the date you fill	yer's address ng employed to me le this form. If y ne employer, co	1737 Sunnyside Highland Park, here? 10 year you have nothing to re- mbine the information	e Avenu IL 6003 rs eport for	any	oyers for that person	For De	ines below. If the body of the	-

D	ebtor 1	Sam Buchbinder		Case	number (if known)	19-23942	2
	Cop	by line 4 here	4.	Foi	1,500.00	For Deb	tor 2 or g spouse 0.00
5.	List	all payroll deductions:					
	5a.	Tax, Medicare, and Social Security deductions	5a.	\$	0.00	\$	0.00
	5b.	Mandatory contributions for retirement plans	5b.	* -	0.00	\$	0.00
	5c.	Voluntary contributions for retirement plans	5c.	\$	0.00	\$	0.00
	5d.	Required repayments of retirement fund loans	5d.	\$	0.00	\$	0.00
	5e.	Insurance	5e.	\$	0.00	\$	0.00
	5f.	Domestic support obligations	5f.	\$	0.00	\$	0.00
	5g. 5h.	Union dues Other deductions. Specify:	5g. 5h.	\$_ + \$	0.00	\$ + \$	0.00
6.		the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.		-			0.00
		•	6.	\$	0.00	\$	0.00
7.		culate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$	1,500.00	\$	0.00
8.	List 8a.	all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.		٨			
	8b.	Interest and dividends	8a.	\$	0.00	\$	0.00
	8c.	Family support payments that you, a non-filing spouse, or a dependent	8b.	\$	0.00	\$	0.00
		regularly receive					
		Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c.	\$	0.00	œ	0.00
	8d.	Unemployment compensation	8d.	\$	0.00	\$ \$	0.00
	8e.	Social Security	8e.	\$	1,550.00		1,000.00
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:	e 8f.	\$	0.00	\$	0.00
	8g.	Pension or retirement income	– 8g.	\$	0.00	\$	0.00
	8h.	Other monthly income, Specify:	8h.+	\$	0.00 +	\$	0.00
€.	Add a	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	1,550.00	\$	1,000.00
10	Calcu	late monthly income. Add line 7 + line 9.	10 6		050 00 1 0		
0.		ne entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10. \$_	3.	,050.00 + \$	1,000.00	= \$ 4,050.00
11.	State Includ other	all other regular contributions to the expenses that you list in Schedule le contributions from an unmarried partner, members of your household, your friends or relatives. It include any amounts already included in lines 2-10 or amounts that are not a	depend				
2.	Add to Write to applies	he amount in the last column of line 10 to the amount in line 11. The resu that amount on the <i>Summary of Schedules</i> and <i>Statistical Summary of Certain</i> s	ılt is the Liabili	comb ties and	ined monthly inc d Related <i>Data,</i> i	ome. f it 12.	\$ 4,050.00
							Combined
3.	Do yo	u expect an increase or decrease within the year after you file this form? No.					monthly income
		Yes. Explain:	····				

Fill in this infor	mation to identify	your case:					
Debtor 1	Sam Buchl	binder			c	theck if this is:	
Debtor 2							y owing postpetition chapte
(Spouse, if filing)					-	13 expenses as o	f the following date:
Inited States Ba	nkruptcy Court for th	ne: NORT	HERN DISTRICT OF ILLI	NOIS		MM / DD / YYYY	
Case number If known)	19-23942						
Official F	orm 106J				1		
	e J: Your						1;
information. If number (if kno	more space is n wn). Answer eve	eeded, att ery questic	e. If two married people a ach another sheet to this on.	re filing together, b form. On the top of	oth ar e e fany add	qually responsible for itional pages, write	or supplying correct your name and case
Pair II Des I. Is this a jo	cribe Your Hous pint case?	ehold					
No. Go	to line 2.						
☐ Yes. Do	oes Debtor 2 live	in a sepai	rate household?				
	No						
	Yes. Debtor 2 mu	st file Offic	ial Form 106J-2, Expenses	s for Separate House	hold of De	ebtor 2.	
Do you ha	ve dependents?	■ No					
Do not list Debtor 2.	Debtor 1 and	☐ Yes.	Fill out this information for each dependent	Dependent's relation Debtor 1 or Debtor		Dependent's age	Does dependent live with you?
Do not stat dependents				CO1-2522012-00248-01-024-14-03-07/19/88-14-02-02-02-02-02-02-02-02-02-02-02-02-02-	1515 - 100 TO 100 T		□ No
dependent	o Hames,						☐ Yes
							□ No □ Yes
							□ res □ No
							☐ Yes
							□ No
							□ Yes
expenses	penses include of people other th od your depender	han 👝	No Yes				anna 1 CG
art 2: Estin	nate Your Ongoir	ng Monthi	y Expenses				
stimate your e	xpenses as of yo a date after the b	ur bankru	ptcy filing date unless your is filed. If this is a supplied to the property of the property o	ou are using this for lemental Schedule	m as a s /, check t	upplement in a Chap he box at the top of	oter 13 case to report the form and fill in the
clude expense e value of suc ifficial Form 10	h assistance and	ion-cash g I have incl	overnment assistance if uded it on Schedule I: Yo	you know our Income		Your expe	1865
		_				•	
The rental of payments ar	or home ownershord any rent for the	nip expens ground or	ses for your residence, in lot.	clude first mortgage	4. \$	5	0.00
If not includ	led in line 4:						
4a. Real e	estate taxes				4a. \$		7 000 00
	rty, homeowner's,	or renter's	insurance		4a. 3		7,800.00
,	maintenance, rep				4c. \$		150.00 100.00
	owner's association				4d. \$		100.00 80.00
			ır residence, such as hom		5. \$		0.00

De	btor 1	Sam Buchbinder	Case nu	mber (if known)	19-23942				
6.	Utili	ities:							
	6a.	Electricity, heat, natural gas	68	ı. \$	70.00				
	6b.	Water, sewer, garbage collection	6b		530.00				
	6c.	Telephone, cell phone, Internet, satellite, and cable services		. \$					
	6d.	Other, Specify:	6d		560.00 0.00				
7.	Foo	d and housekeeping supplies	7						
8.		dcare and children's education costs	8		800.00				
9.		hing, laundry, and dry cleaning	9	-	0.00				
10.		conal care products and services		. \$	200.00				
11.		ical and dental expenses	11		100.00				
12.		sportation. Include gas, maintenance, bus or train fare.	'''	. Ψ	100.00				
		ot include car payments.	12	. \$	300.00				
13.	Ente	rtainment, clubs, recreation, newspapers, magazines, and books	13.	. \$	0.00				
14.	Char	ritable contributions and religious donations	14.		0.00				
	Insu	rance.			0.00				
	Do n	ot include insurance deducted from your pay or included in lines 4 or 20.							
	15a.	Life insurance	15a.	\$	0.00				
	15b.	Health insurance	15b.	\$	130.00				
		Vehicle insurance	15c.	\$	260.00				
		Other insurance. Specify:	15d.	\$	0.00				
16.	Taxe	s. Do not include taxes deducted from your pay or included in lines 4 or 20.		-	0.00				
	Spec	ify:	16.	\$	0.00				
17.		liment or lease payments:							
		Car payments for Vehicle 1	17a.	\$	0.00				
		Car payments for Vehicle 2	17b.	\$	0.00				
		Other. Specify:	17c.	\$	0.00				
		Other. Specify:	17d.	\$	0.00				
18.	Your	payments of alimony, maintenance, and support that you did not report as							
	dedu	cted from your pay on line 5, Schedule I, Your Income (Official Form 106I)	18.	\$	0.00				
19.		payments you make to support others who do not live with you.		\$	0.00				
~~	Specif		19,						
20.	Other	real property expenses not included in lines 4 or 5 of this form or on Sched							
		Mortgages on other property	20a.	\$	0.00				
		Real estate taxes	20b.	,	7,800.00				
		Property, homeowner's, or renter's insurance	20c.		200.00				
		Maintenance, repair, and upkeep expenses	20d.	\$	300.00				
		Homeowner's association or condominium dues	20e.	\$	800.00				
1.	Other	: Specify:	21.	+\$	0.00				
22	Calcul	late your monthly expenses							
		dd lines 4 through 21.		ė.					
		copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2]	\$	20,280.00				
				\$					
	∠∠c. A	dd line 22a and 22b. The result is your monthly expenses.		\$	20,280.00				
3.	Calcul	ate your monthly net income.	L						
		Copy line 12 (your combined monthly income) from Schedule I.	23a.	\$	4.050.00				
		Copy your monthly expenses from line 22c above.	23b.		4,050.00				
		, , , , , , , , , , , , , , , , , , ,	4. JU	Ψ	20,280.00				
2	23c. S	Subtract your monthly expenses from your monthly income.							
	7	The result is your monthly net income.	23c.	\$	-16,230.00				
									
4. [Do you	o you expect an increase or decrease in your expenses within the year after you file this form?							
ř	or exa	r example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a diffication to the terms of your mortgage?							
_	_	ation to the terms of your mongage?							
	Mo.								
	⊒ Yes	, Explain here:			***************************************				

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Fill in this in	formation to identify your	case:				
Debtor 1	Sam Buchbinder				_	
	First Name	Middle Name	Last Name			
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name			
-						
United States	Bankruptcy Court for the:	NORTHERN DISTRICT	F OF ILLINOIS			
Case number	19-23942					
(if known)					Check if this is an	
					amended filing	
Official Fo	rm 106Dec					
			Dalekania Ori	1. # #		
Declara	ation About a	<u>n individuai</u>	Deptor's Sc	nedules	12/15	
,	. 18 U.S.C. §§ 152, 1341, 19 ign Below	519, and 3571.				
Did you	oay or agree to pay somed	one who is NOT an attor	ney to help you fill out ba	nkruptcy forms?		
■ No						
☐ Yes.	Yes. Name of person Attach Ba				inkruptcy Petition Preparer's Notice,	
					laration, and Signature (Official Form 119)	
Under per that they a	nalty of perjury, I declare ti are true and correct.	hat I have read the sumr	mary and schedules filed	with this declaration and		
X /s/ Sa	ım Buchbinder		х			
Sam	Buchbinder		Signature of D	ebtor 2		
Signat	ure of Debtor 1					

Date October 7, 2019